

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002809

FILED  
Jan 05, 2006  
Secretary of State

**Entity Name:** FLAGLER'S LANDING CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

88 HILTON HAVEN DR.  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

506 LOUISA STREET  
KEY WEST, FL 33040

**New Mailing Address:**

P.O. BOX 4201  
KEY WEST, FL 33041

FEI Number: 65-1156280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARRELLY, GREGORY G  
CATALFOMO & FARRELLY  
506 LOUISA STREET  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MCCOY, CHARLES  
Address: 88 HILTON HAVEN DRIVE  
City-St-Zip: KEY WEST, FL 33040

Title: STD ( ) Delete  
Name: FARRELLY, GREGORY G  
Address: 4 MCCOY CIR  
City-St-Zip: KEY WEST, FL 33040

Title: VD ( ) Delete  
Name: FERRIS, ALFRED J  
Address: 9 MCCOY CIRCLE  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SCHIPPEREIT, STUART  
Address: 12 MCCOY CIRCLE  
City-St-Zip: KEY WEST, FL 33040

Title: V (X) Change ( ) Addition  
Name: VAN TUYL, JOHN R  
Address: 10 MCCOY CIRCLE  
City-St-Zip: KEY WEST, FL 33040

Title: ST (X) Change ( ) Addition  
Name: CATALFOMO, ANTHONY J  
Address: 4 MCCOY CIRCLE  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STUART SCHIPPEREIT

P

01/05/2006

Electronic Signature of Signing Officer or Director

Date